PTO/SB/31 (09-06)

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Telephone number

August 8, 2007

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I am the		M. b. 11/2/2
	applicant/inventor.	
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.	David P. Oooper
	(Form PTO/SB/96)	Typed or printed name
x	attorney or agent of record. Registration number 33,372	(503) 224-6655

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

× *Total of forms are submitted.

attorney or agent acting under 37 CFR 1 34.

Registration number if acting under 37 CFR 1,34

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1 14 and 41.8. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office. U.S. Operational of Commerce, P.O. Box 1490, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1490, Alexandria, VA 22313-1450.